

**Agency Report of:  
Public Official Appointments**

**A Public Document**


<b>1. Agency Name</b> City of Santa Barbara			<b>California Form 806</b> For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Gwen Peirce, City Clerk Services Manager			
Area Code/Phone Number (805) 564-5309	E-mail GPeirce@SantaBarbaraCa.gov	Page 1 of 1	Date Posted: 01/16/14 (Month, Day, Year)

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Santa Barbara County Association of Governments (SBCAG)	▶ Name <u>Schneider, Helene</u> <small>(Last, First)</small> Alternate, if any <u>White, Bendy</u> <small>(Last, First)</small>	▶ <u>01 / 14 / 14</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Cachuma Operations and Maintenance Board (COMB)	▶ Name <u>Francisco, Dale</u> <small>(Last, First)</small> Alternate, if any <u>White, Bendy</u> <small>(Last, First)</small>	▶ <u>01 / 14 / 14</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>128</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other

**3. Verification**

I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.

	Gwen Peirce	City Clerk Services Manager	01/16/14
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: \_\_\_\_\_